PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								AKIONAK. 604A					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR				OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			30					RATI	E	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			3 0 minus 20=		• 10			X\$ 9	=	90.00	OR	X\$18=	
INDEPENDENT CLAIMS			7 minus 3 =		4			X42:	=	168.00	OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140= C			OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA		618.a	OR	TOTAL	
CLAIMS AS AMENDED - PART II									•			OTHER	
(Column 1)			(Column 2)			(Column 3)	1 .	SMA		NTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NOM	Total	* 30	Minus	**	30	=		X\$ 9	=		OR	X\$18=	
<b>AME</b>	Independent	• 7	Minus	***	- /		<b>[</b>	X42=	=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	<b>=</b> .	:	OR	+280=	
							!	TO	TAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)					_		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT B	Total	*	Minus	**		=		X\$ 9	<del>!=</del>		OR	X\$18=	
	Independent	*	Minus	***	T 01	-		X42:	=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF MI	JLTIPLE DEP	ENDEN	I CLAIM			+140	)=		OR	+280=	
							1	TO ADDIT. F	TAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		· ·				• •	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	strik "		=		X\$ 9	)=		OR	X\$18=	
	Independent	*	Minus			] a-		X42=			OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140	)=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** TOTAL  OR										TOTAL			
***	**If th "High st Number Previously Paid For" IN THIS SPACE is less than 20, nter "20."  ***If the "High st Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												